

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 10636292

FILING DATE 08-11-03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		4				
4		2				
5		2				
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TOTAL IND.	7					
TOTAL DEP.	16					
TOTAL CLAIMS						

	IND		DEP		IND		DEP		IND		DEP	
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